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| P O BOX 92764<br>SAN DIEGO, C   | 19   |  | l he<br>Stat<br>addi<br>tran   | I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being faesimile transmitted to the USPTO (571) 273-2885, on the date indicated below.   |                        |                    |  |
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| APPLICATION NO.   | FILING DATE  |  | FIRST NAMED INVENTOR   |   | ORNEY DOCKET NO.       | CONFIRMATION NO.   |  |
| 09/690,074 10/16/2000   |  | Scott C. Harris  |  | EDIT SYSTEM/CH  | 2021                   |                    |  |
| TITLE OF INVENTION  | : INTELLIGENT CREI   | DIT CARD SYSTEM  |  |   |                        |                    |  |
| APPLN. TYPE   | SMALL ENTITY   | ISSUE FEE DUE  | PUBLICATION FEE DUE  | PREV. PAID ISSUE FEE  | TOTAL FEE(S) DUE       | DATE DUE           |  |
| nonprovisional  | YES  | \$720  | \$0  | \$0   | \$720                  | 04/30/2008         |  |
| EXAM  | INER   | ART UNIT   | CLASS-SUBCLASS   | ]   | •                      |                    |  |
| ST CYR, DANIEL  |  | 2876   | 235-380000   |   |                        |                    |  |
| ☐ "Fee Address" ind<br>PTO/SB/47; Rev 03-0<br>Number is required.  3. ASSIGNEE NAME A:<br>PLEASE NOTE: Uni<br>recordation as set fort!  (A) NAME OF ASSIG | ondence address (or Cha<br>3/122) attached.<br>ication (or "Fee Address<br>2 or more recent) attach<br>ND RESIDENCE DAT.<br>ess an assignee is ident<br>hin 37 CFR 3.11. Com<br>JNEE | inge of Correspondence " Indication form ted. Use of a Customer A TO BE PRINTED ON iffed below, no assignce pletion of this form is NO | (1) the names of up to<br>or agents OR, alternativ<br>(2) the name of a single<br>registered attorney or a<br>2 registered patent attor<br>listed, no name will be<br>THE PATENT (print or typ<br>data will appear on the pa<br>T a substitute for filing an<br>(B) RESIDENCE: (CITY   | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, or agents OR, alternatively, 20, the name of a single firm (having as a member a 2 registered attorney or agent) and the names of up to 7 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.  2. Part ENT (print or type)  a will appear on the patent. If an assignee is identified below, the document has been filed for substitute for filing an assignment.  3) RESIDENCE: (CITY and STATE OR COUNTRY) |                        |                    |  |
| Please check the appropriate assignce category or categories (will not be pr  4a. The following fec(s) are submitted:    Issue Fee                        |  |  | inited on the patent): Individual Corporation or other private group entity Government  Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by reciti card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment. to Opposit Account Number 50—1387 (enclose an extra copy of this form). |   |                        |                    |  |
|   | s SMALL ENTITY statu   | is. See 37 CFR 1.27.   | b. Applicant is no long  | ger claiming SMALL EN   | TITY status, See 37 CF | R 1.27(g)(2).      |  |
| Authorized Signature  | /Scott C Har   |  | -  | Date 2/28/0   |                        |                    |  |
| Typed or printed name   | Scott C  | . Harris   | ·  | Registration No.  | 32,030                 |                    |  |

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